								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR								10736354					
Ellective October 1, 2003													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL EN		OR	OTHER SMALL E	1	
TOTAL CLAIMS			35		,			RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			36 minus 20=		- 16			XS 9=	135	OR	X\$18=	ŀ	
INDEPENDENT CLAIMS			7 minus 3 =		* 0 /		ľ	X43=		OR	X86=		
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT		_ =	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		÷145=		OR	+290=		
* If	the difference	in column 1 is I	less than zero, enter "0" in column 2				L	TOTAL	570	OR OR	TOTAL		
						<u> </u>		OTHER	THAN				
	C,	LAIMS AS A (Column 1)		(Colur		(Column 3)	_ :	SMALL E	ENTITY	OR	SMALL E	NTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	**		=	Ì	XS 9=		OR	XS18=		
MEN	Independent	*	Minus	***		=	Ī	X43=		OR	X86=		
٥	FIRST PRESE	ILTIPLE DEPENDENT		T CLAIM	Λ		+145=		OR	+290=			
	TOTAL										TOTAL		
		Αί	ODIT. FEE		OR	ADDIT. FEE							
	(Column 1)		T		mn 2) HEST				ADDI-	1		ADDI-	
AMENDMENT B	-	REMAINING AFTER		_	MBER OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
		AMENDMENT		1	FOR	LATTA	╽┟		FEE	ļ		FEE	
	Total	*	Minus	**	<u> </u>	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T 01 411	=	[X43=		OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						¹ [+145=		OR	+290=		
	TOTAL ADDIT. FEE										TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
	\ \	CLAIMS		HIG	HEST		1 г		ADDI-	1		ADDI-	
F		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT C	Total	*	Minus	**	<u> </u>	=	1	X\$ 9=		OR	X\$18=		
MEN	Independent	*	Minus	***		=	1 h	X43=	 	1	V06-		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OF	` 		
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTA		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	ADDIT. FEI	Ē	
***	The Highest Nur The Highest Nur	imber Previously Pa nber Previously Pa	alu For (Total o	or Indepen	dent) is th	ne highest numb	er fou	nd in the ap	opropriate b	ox in c	column 1.		